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Attorney Docket No. 262.PC2
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Delaney et al.

Serial No.: 10/678,454

Group No.: 1632

Filed: October 1, 2003

Examiner: Norma Lyn Alonzo

For: HBV MUTATIONS ASSOCIATED WITH REDUCED SUSCEPTIBILITY TO ADEFOVIR

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is

- ☐ a small entity - verified statement:
☐ attached.
☐ already filed.
☒ other than a small entity.

CERTIFICATE OF MAILING (37 CFR 1.8 (a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: December 9, 2004

Robin Torres
(Type or print name of person mailing paper)
Robin Torres
(Signature of person mailing paper)

12/14/2004 HGUENAI 00000015 071250 10678454

01 FC:1251 120.00 DA

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply

- (a) ☒ Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17 (a)-(d)) for the total number of months checked below:

	<u>Extension (months)</u>	<u>Fee for other than small entity</u>	<u>Fee for small entity</u>
<input checked="" type="checkbox"/>	one month	\$110.00	\$55.00
<input type="checkbox"/>	two months	\$430.00	\$215.00
<input type="checkbox"/>	three months	\$980.00	\$490.00
<input type="checkbox"/>	four months	\$1,530.00	\$765.00
		Fee \$	110.00

If an additional extension of time is required please consider this a petition therefor.

- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR RATE ADDIT. FEE
TOTAL *	1	MINUS **	50	= 0	X 9 = \$		X18= \$
INDEP. *	1	MINUS **	20	= 0	X42= \$		X84= \$
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+140= \$		+280= \$

TOTAL
ADDIT. FEE \$

OR TOTAL
ADDIT.
FEE \$

(c) ☒ No additional fee for claims is required.

OR

(d) ☐ Total additional fee for claims required \$ _____

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$ _____

☒ Charge Account No. 07-1250 the sum of \$ 110.00

A duplicate of this request is attached.

FEE DEFICIENCY

6. Authorization to Charge Additional Fees

☒ The Commissioner is hereby authorized by this document to charge any additional fees which may be required by this paper and during the entire pendency of this application to Account No. 07-1250, except the issue fee at or before mailing of Notice of Allowance, pursuant to 37 CFR 1.311 (b).

Reg. No. 31,796

Tel. No.: (650) 522-5525



SIGNATURE OF ATTORNEY

William Schmonsees

Type or print name of attorney

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In re PATENT APPLICATION of)	Group Art Unit: 1632
)	Attorney Docket No. 262.PC2
Delaney, et al.)	Examiner: Norma Lyn Alonzo
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Serial No: 10/678,454)	
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Filed: October 1, 2003)	
)	
Title: HBV MUTATIONS ASSOCIATED WITH)	
<u>REDUCED SUSCEPTIBILITY TO ADEFOVIR</u>)	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is responsive to the Patent and Trademark Office action mailed October 19, 2004. A request for a ONE MONTH extension of time is submitted herewith, whereby the time for response expires on December 19, 2004.

Group VI, Claim 25, drawn to a diagnostic PCR kit for HBV rtA181V or rtA181T is elected for examination, without traverse. Claims 1-24 and 26 - 50 are canceled in this response.

In view of the requirement for restriction/election, and under the protection of 35 U.S.C. §121, please cancel Claims 1-24 and 26 - 50 without prejudice to Applicants' rights to pursue the canceled subject matter in divisional/continuation applications.